

BEST AVAILABLE COPY

MULTIPLE DEPEN CLAIM FEE CALCULATION SHEET (FOR USE WITH FORM PTO-875)						SERIAL NO. 10/58732	FILING DATE 8/28/84						
CLAIMS													
	AS FILED		AFTER 1 ST AMENDMENT		AFTER 2 ND AMENDMENT			AS FILED		AFTER 1 ST AMENDMENT		AFTER 2 ND AMENDMENT	
	IND.	DEP.	IND.	DEP.	IND.	DEP.		IND.	DEP.	IND.	DEP.	IND.	DEP.
1	1					51							
2		1				52							
3		1				53							
4		1				54							
5		1				55							
6		1				56							
7		1				57							
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10		1				60							
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12	1					62							
13		1				63							
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15		1				65							
16		1				66							
17		1				67							
18		1				68							
19	1					69							
20		1				70							
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44						94							
45						95							
46						96							
47						97							
48						98							
49						99							
50						100							
TOTAL IND.	3		↓		↓		↓		↓		↓		
TOTAL DEP.	20	←		←	←		←		←		←		
TOTAL CLAIMS	23	↓	↓	↓	↓	↓	↓	↓	↓	↓	↓	↓	